Effective October 1, 2003													
CLAIMS AS FILED - PART I (Column 1) (Column 2)							SMALL ENTITY TYPEO			OR	OTHER THAN		
TOTAL CLAIMS 750							ľ	RATE	FEE	7	RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FE	E 385.00	OR	BASIC FEE	770.00	
TOTAL CHARGEABLE CLAIMS			2 Ominus 20=		· 0			X\$ 9=		OR	X\$18=		
INDEPENDENT CLAIMS			/ minus 3 =		Ø			X43=	1./	OR	X86=		
M	JLTIPLE DEPE	NDENT CLAIM P	RESEÑT					+145=	1	OR	+290=		
* 11	the difference	e in column 1 is	less than zero, enter "0" in column 2			L	TOTAL	285	OR	TOTAL			
	17. 11		1,747	J	OTHER	THAN							
_ (3125 15	(Column 1)	MENDED - PART II (Column 2) (C			(Column 3)	olumn 3) SMALL			OR	SMALL ENTITY		
AMENDMENT A		REMAINING AFTER AMENDMENT		NUME PREVIO PAID F	BER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	.21	Minus	-21	2_	= /		X\$ 9=	25	OR	X\$18=		
	Independent	NTATION OF M	Minus	3	O) A (A A	- <i>O</i>		X43=		OR	X86≈		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+145=		OR	+290=		
								TOTAL		00	TOTAL		
		(Column 1)		(Colum	n 2) .	(Column 3)	AE	DIT. FEE	<u> </u>	j O., ,	ADDIT. FEE!		
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIOU PAID F	ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	•	Minus	**	•	=		X\$ 9=		OR	X\$18=		
	Independent	+	Minus	***		• .		X43=		OR	X86=		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								145=		OR	+290=		
								TOTAL DIT. FEE		OR ,	TOTAL ODIT. FEE		
(Column 1) (Column 2) (Column 3)													
MEN		. CLAIMS REMAINING AFTER AMENDMENT	·	HIGHE NUMBE PREVIOL PAID FO	st Er Isly	PRESENT EXTRA	F	RATE	ADDI- TIONAL FEE		RATE .	ADDI- TIONAL FEE	
	Total	•	Minus	##		=	>	(\$ 9=		OR	X\$18=		
	Independent		Minus	***		2	1	(43=		ı	X86=		
- 1	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							145=		OR	+290=	—	
If the entry in column 1 is less than the entry in column 2, write "0" in column 3. TOTAL OR TOTAL													
	the Highest Nur	mber Previously Pai ber Previously Paid	d For IN THIS	SPACE is I	ess than	3 enter *3 *				~	DD(T. FEE L mn 1.		

Application or Docket Number